

## HICAP 05-02

### HICAP Orphan Call Center

#### RFP Questions & Answers

- Q: *If the call center has no Medicare experience, will HICAP provide the necessary information for specialized training? How likely is HICAP to award this contract to a call center without Medicare experience?*
- A: The contractor needs to have experience with Medicare and health insurance issues per the requirements specified in the RFP.
- Q: *In order to create a model intake document and process please provide questions required to assist the callers.*
- A: The process for developing an intake form requires knowledge of Medicare, health insurance, and Part D of the Medicare Modernization Act. The development of this form is a part of the RFP requirements.
- Q: *Our follow up procedures are customized, with that in mind how often should the referrals be followed up with?*
- A: The frequency of follow-up will be determined by the contractor. This should be answered in accordance with the RFP instructions and is a part of the evaluation and scoring.
- Q: *Please provide specific examples of caller crises.*
- A: Caller crises would be any situation where Medicare beneficiaries felt their health and health care coverage was threatened whether real or perceived. A part of the scoring of this RFP is how knowledgeable the proposer is with these kinds of situations.
- Q: *Is the provision of a local phone number (Direct Inward Dial) to rout the orphan calls proficient?*
- A: As described in the RFP out-of-state callers, cellular callers and calls from within California from prefixes that are not identified in the MCI central database will be transferred automatically to the agency receiving the contract award as a result of this RFP. A part of the scoring of this RFP will be based upon an organizations proposed use of technology, equipment, and phone services.

- Q: *If known, please provide the maximum number of orphan calls ever received at once.*
- A: Since the Medicare Modernization Act implementation is a one time event, there is no way to predict any particular day's volume of calls. We can only refer you to the RFP instructions that specify an average monthly volume up to 600 calls per month.
- Q: *What is the average call time?*
- A: Since the Medicare Modernization Act implementation is a one time event, there is no way to predict what the average call time might end up being.
- Q: *Does the projected monthly call volume include outbound follow up calls?*
- A: The call volume average in the RFP does not include calls going outbound for follow up, only the calls coming into the center.
- Q: *Is the projected call volume steady throughout the year or is it seasonal?*
- A: Since the Medicare Modernization Act implementation is a one time event, there is no way to predict the volume. There could be times when it is a high volume due to media events about Part D or marketing by individual Prescription Drug Plans. The contractor must be able to accommodate at least getting back to each caller if at any time the volume grows beyond capacity.
- Q: *Please clarify the specific call scenarios the orphan call center will handle? For example, will the orphan call center be answering specific benefit questions or referring callers to the appropriate HICAP organization and then following up?*
- A: This RFP is requesting much more than simple referral to local HICAP providers. The RFP requirements should be carefully reviewed by any proposer to see the intent of the service. This is not requesting a referral service.
- Q: *Where do we find information regarding DVBE requirements and is there enough time before this proposal is due to make a good faith effort?*
- A: Please carefully read the RFP instructions under SECTION IV Preference Programs. DVBE is not a preference being considered under this RFP.

